FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Num		3235-0076			
Expires:	April	30.2008			
Expires: April 30,2008 Estimated average burden					
hours per response 16.00					

SEC USE ONLY					
Prefix	Serial				
DATE R	ECEIVED				
	1				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
2007 Offering	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment	RECEIVED
Type of Filing: New Filing Amendment	HEOGIVED 1
A. BASIC IDENTIFICATION DATA	EC 1 7 2007
1. Enter the information requested about the issuer	1 2007
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Portable Storage of New England, LLC	202 /\$
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Nu	mber (Including Area Code)
575 Pool Street, Biddeford, ME 04005-9504 207-282-4669	\checkmark
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone N	umber (Including Area Code)
(if different from Executive Offices) PROCESSED	
Brief Description of Business	
Portable storage units DEC 3 1 2007	
Type of Business Organization	. <u>! </u>
corporation limited partnership, alread PINANCIAI other (please specify):	
business trust limited partnership, to be formed limited liability company	07086282
Month Year	07080282
Actual or Estimated Date of Incorporation or Organization: O 6 O 7 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

·	•	A. BASIC ID	ENTIFICATION DATA	•	· · · · · · · · · · · · · · · · · · ·
2. Enter the information re	equested for the fo	ollowing:			
 Each promoter of 	the issuer, if the is	suer has been organized v	within the past five years;		
 Each beneficial ow 	ner having the pov	ver to vote or dispose, or d	irect the vote or disposition	of, 10% or more o	f a class of equity securities of the issuer
 Each executive of 	ficer and director o	of corporate issuers and or	f corporate general and ma	naging partners of	partnership issuers; and
 Each general and i 	managing partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Miniutti, Patrick	if individual)				
Business or Residence Addre 575 Pool Street, Biddefo			(ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)		······································		
DiTomasso, Frank					
Business or Residence Addre		Street, City, State, Zip C	ode)		
Bear Path, Hampton, N	H 03842				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	lode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			<u></u>	
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
	(Usc bla	ink sheet, or copy and use	additional copies of this s	heet, as necessary)

7	B. INFORMATION ABOUT OFFERING												
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No E			
2.									\$ 0.0	0			
	The state of the s									Yes	No		
3.		_	permit join		-							K	
4.	commis If a pers or state	sion or sim son to be lis s, list the n	ilar remune sted is an ass	ration for s sociated pe roker or de	solicitation erson or age caler. If me	of purchasent of a broker ore than five	ers in conne ker or deale e (5) person	ection with r registered ns to be list	sales of sec d with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state sons of such		
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Cip Code)		· · · · · - · - · - · ·				
Nar	me of As	sociated B	roker or De	aler			· · · · · · ·						
Stat	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers	-					
	(Check	"All State:	s" or check	individual	States)	***************						☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)				<u> </u>					· · ·
Bus	iness or	Residence	Address (?	Number an	d Street, C	ity, State,	Zip Code)						
Nar	ne of Ass	sociated B	roker or De	aler			· · · · · · · · · · · · · · · · · · ·						
Stat	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	••••••••••			······	***************************************	*************	☐ All	States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full	l Name (Last name	first, if indi	ividual)									
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
	(Check "All States" or check individual States)							States					
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	2	\$
	Equity	`	
	Common Preferred	,	<u> </u>
	Convertible Securities (including warrants)	r	¢
	Partnership Interests		-
	Other (Specify Class B LLC Units		- *
	Total	- 000,000.00	\$ 325,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	8	§ 325,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	•
	Regulation A		<u> </u>
	Rule 504		\$
	Total		\$ \$ 0.00
4			3_0.00
*	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		S
	Printing and Engraving Costs		\$
	Legal Fees	_	\$ 10,000.00
	Accounting Fees		
	Engineering Fees	-	\$
	Sales Commissions (specify finders' fees separately)	· · ·	
	Other Expenses (identify)	_	\$
	Total		s 10,000.00
			س

	C. OFFERING PRICE, N	TUMBER OF INVESTORS, EXPENSES AND US	SE OF PROCEEDS	• •
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	C Question 4.a. This difference is the "adjuste	d gross	\$
5.	Indicate below the amount of the adjusted gros each of the purposes shown. If the amount for check the box to the left of the estimate. The tot proceeds to the issuer set forth in response to	or any purpose is not known, furnish an estimated of the payments listed must equal the adjuste	ate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		ss	\$
	Purchase of real estate			S
	Purchase, rental or leasing and installation of and equipment		 	\$
	Construction or leasing of plant buildings and			
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	e value of securities involved in this assets or securities of another		
	Repayment of indebtedness			
	Working capital			\$_490,000.00
	Other (specify):	1	[] \$	
				. 🗆 \$
	Column Totals			\$ 490,000.00
	Total Payments Listed (column totals added)			90,000.00
Г	The way the second the	D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to information furnished by the issuer to any non-	o furnish to the U.S. Securities and Exchange (Commission, upon writte	n request of its staff,
Iss	uer (Print or Type)	Signarure	Date	· · · · · · · · · · · · · · · · · · ·
Po	ortable Storage of New England, LLC	Jatur m. minter	12/14/0	7
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Pat	rick Miniutti	Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E.	STATE SIGNATURE		
1.		•	subject to any of the disqualification	Yes	No 🔀

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Portable Storage of New England, LLC	Signatule Votere In. Minth	Date 12/14/07
Name (Print or Type)	Title (Print or Type)	
Patrick Miniutti	Manager	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.